



COMMUNITY DEVELOPMENT DEPARTMENT PLANNING DIVISION

HAZARDOUS MATERIALS DISCLOSURE STATEMENT

PROJECT ADDRESS: PLAN CHECK #: _____

BUSINESS NAME/USE: _____

- ☐ YES ☐ NO Do you generate, store or use hazardous materials at this facility?
- ☐ YES ☐ NO Will the applicant or future occupant handle a hazardous material or a mixture containing a hazardous material equal to or greater than the amounts specified on the list of acutely hazardous materials? (See APPENDIX D, LIST OF ACUTELY HAZARDOUS MATERIALS)
- ☐ YES ☐ NO Do you generate, treat, or store hazardous waste at this facility?
- ☐ YES ☐ NO Will the applicant or future occupant be installing an underground storage tank at this facility?
- ☐ YES ☐ NO Will the applicant or future occupant be installing an aboveground storage tank greater than 660 gallons or with a cumulative storage capacity of greater than 1320 gallons?
- ☐ YES ☐ NO Will your facility or the proposed building or modified facility be within 1000 feet of the outer boundary of a school, hospital, or long-term health care facility?
- ☐ YES ☐ NO Will the intended use of the building by the applicant or future building occupant require a permit for construction or modification from the South Coast Air Quality Management District? (See APPENDIX A, PERMITTING CHECKLIST, for guidelines)

I have read the Hazardous Materials Disclosure Requirements and the SCAQMD Permitting Checklist. I understand the requirements under California Health and Safety Code Section 25505, 25533, 25534, 42303, and understand the requirements of the City of Riverside Fire Department regarding hazardous materials.

Signature: _____

Printed Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Telephone: (_____) _____ Facsimile: (_____) _____

E-Mail Address: _____

OWNER
ENGINEER

TENANT
AUTHORIZED AGENT (with letter on file)

ARCHITECT